The Department of History and Philosophy of Medicine

Volume XXVIII, No. 2, Fall 2018
I am writing during a brief summer lull that follows a springtime busy with grades, department reviews, a new budget, and a lengthy lecture I gave in Los Angeles to a few hundred of my closest colleagues. It is a brief, but lovely, pause in a swirl of change. In this newsletter, you can learn about a number of changes in the KUMC Department of History and Philosophy of Medicine, both recent and underway. The department this year has added new programs and new faculty. We got deeply involved in an important and unexpected name change at the medical school. There are even some changes in my job description. Our departmental programs span the universe of history and philosophy of medicine, from rare books, museum artifacts, and archival collections to teaching and scholarship in history and ethics, to clinical service in ethics, palliative medicine, and ambulatory care. And I would judge it to be an expanding universe, from my perspective here on the inner rim of an arm of this minor spiral galaxy.

This fall we welcome a series of visiting speakers that have provided a chance for collaboration with a number of like-minded institutions in Kansas City. We are teaming up with the National World War One Museum here in October to put on an evening program on “Influenza in 1918 and 2018,” featuring a talk by Dr. Powel Kazanjian, historian and chief of infectious disease at the University of Michigan. Also in October, Nico Meli from the Department of History and Philosophy of Science and Medicine at Indiana University will be here to deliver the Friesen Lecture in the History of Surgery. In September, we are joining forces with the KC Public Library to host a public lecture by Professor Janet Golden from Rutgers University, to learn “How Babies Made Us Modern.” We are also continuing our involvement with the history of science fellowship programs and monthly works-in-progress seminars at the remarkable Linda Hall Library, one of the world’s largest privately supported libraries dedicated to science.

The biggest single change in the department for this coming year is the arrival of Jason Glenn, joining our faculty as an associate professor of research ethics. With his training in history of medicine, his extensive teaching experience in ethics, history, and humanities at the graduate and postgraduate levels, and his remarkable accomplishments in community engagement and progressive reform, Professor Glenn brings a new dimension to the department. His arrival supports a campus-wide initiative from the office of the Vice Chancellor of Research to deepen appreciation and understanding of research ethics across the medical center.

In related educational initiatives, we are continuing to build on the new elective curriculum to expand offerings in history and ethics, and have included a new element of medical humanities. Elective weeks consist of four one-week blocks spread out across the first year, and two blocks in the second year. We had terrific groups of inquisitive first year students who went through two intensive courses in the first year, in a whirlwind experience. Andrés Rodríguez, a poet and literary scholar, joined the department as adjunct faculty while he directs the medical center’s writing program. Students have the chance to spend time with him reading the work of poet-physicians like William Carlos Williams and Rafael Campo. The intensive weeks also include opportunities to explore in the museum and the rare books collections as well as the archives. Independent projects worked up by the students during previous elective weeks ranged from a comparative assessment of Canadian and American health coverage for the elderly to a medical-student guided role play simulating a plague quarantine in a fourteenth-century Italian city. I got to play a city elder.

Much about my role here in the department remains the same, but I have recently had several significant changes in my national responsibilities. I have just stepped down from a two-year stint as president of the American Association for the History of Medicine. While I will miss the pleasures of my immersion in the life of my favorite scholarly association, I am enjoying the transition to the relatively peaceful role of immediate past president. More significantly, Ryan Fagan and I have now
handed off the editorial responsibilities for the Journal of the History of Medicine and Allied Sciences to Dr. Laura Hirshbein, a historian of psychiatry and a professor of psychiatry at the University of Michigan. There were many exciting highlights of our tenure with the journal. We were able to convince Oxford University Press to combine — in a new online format — one chapter of a newly released Oxford book with selections from related past articles in the journal. This virtual, hybrid issue of the journal featured an introduction by the book’s author, Emily Mayhew, characterizing the state of scholarship on World War I medicine, illustrated by her new work and the recent publications in the journal. Ryan and I also had the pleasure during our tenure of assisting in production of four special issues. These issues hint at the liveliness and diversity of present scholarship in the history of medicine. Topics included food as medicine, childbirth in the twentieth century, the texts and the craft of Renaissance surgery, and a festschrift on the history of psychiatry to honor historian Gerry Grob. While I will miss my interactions with authors and the satisfactions of seeing a new issue in hand every few months, it is exciting to be able to hand over the journal to Laura and to watch how it continues to develop. The change has also allowed me to act on a rare opportunity to accept a new editorial position with a major publication series. Beginning in May, I started work with Rochester University Press on the Rochester Studies in Medical History, a longstanding production of the press. This series has an excellent backlist of over fifty works in the history of medicine, brought to print by the prior editor, Professor Ted Brown. Already a number of promising manuscripts have come into the office and Ryan and I have our red pencils ready and sharpened.

Among these many changes that are swirling around the department, certainly the most exciting was a mere change of name. The medical school divides each incoming class into eight academic societies for purposes of advising, with each society bearing the name of an important leader or alum from the school’s history. This year the Wahl Society becomes the Cates Society, to be named after Dr. Marjorie Cates. Work in the KUMC archives by one of our recent medical graduates, Dr. Tequilla Manning, helped bring Dr. Cates’s remarkable life and career into focus and inspired the student-led movement that brought about this historic change. You can read more about Dr. Cates and the new Cates Society later in this newsletter.

Chris Crenner, MD, PhD, Chair
NATE GRABILL: A FELLOW IN HAITI

When a first year medical student applies for a summer research fellowship, our expectations are high relative to quality of their research proposal and feasibility of accomplishing goals stated. Those are requisites in a competitive application process. It is not requisite that an applicant has prior experience as an Army Ranger, nor that they have logged, and led, a dozen previous service or medical mission trips to the back country of the developing nation where research is proposed.

Nate Grabill is the exception, and his proposal was clearly exceptional as judged by all faculty evaluating proposals for the 2018 Clendening Summer Research Fellowship program (CSF) of the University of Kansas School of Medicine. The proposal was titled “Haiti Medical Survey Project,” with a strategic plan to create a map of medically under-served villages in a very remote and mountainous area of Haiti, and simultaneously assess medical needs for future work of a faith-based organization.

As his project proposal stated:

Access to healthcare is a major concern in the United States. Lack of healthcare access is caused by many issues including affordability of insurance, ability to pay out-of-pocket expenses and proximity to care. As bad as these issues are in the United States, they are much worse in most third world countries. One of these countries, Haiti, continues to be the poorest country in the western hemisphere with a healthcare system that is woefully inadequate for those who can pay and totally inaccessible to those who cannot. In rural areas of Haiti, the inhabitants do not have access based on inability to pay as well as proximity to care. The more remote the location the less access there is to any type of legitimate healthcare. Sometimes this void is filled by Non-Governmental Organizations (NGOs) but many times there is no one to fill the void and the population suffers dramatically.

One of the reasons I decided to become a physician was to do my part in addressing this void.

To that end, the purpose of this Clendening Summer Fellowship proposal is to complete a survey of the medical needs of a remote mountainous area of Eastern Haiti surrounding the village of Thoman. There is a large population that live in small villages in the mountains around Thoman. This project would determine the location and medical needs of this population. I would spend approximately 6 weeks finding these small villages and questioning village elders and other inhabitants to develop an understanding of their needs. This information would be compiled into a report that my host organization, But God Ministries (BGM), would use to make informed resource decisions concerning how to best serve this area. An outcome of this project would be plans for strategic locations for future medical clinics, schools, food distribution and service projects. . . . The goal of this project would be to find all villages within a day’s walk of Thoman, assess the needs of the population (medical, food, water, etc.) and organize this information to allow BGM to make strategic decisions on how best to serve this area.

Nate’s project was and is very ambitious one entailing more risks than we might be comfortable with for a young medical student traveling abroad. This CSF applicant also happened to be a young grandpa, however, a “nontraditional” medical student, with much life experience that bodes well both for safety and success.
After just one week in Haiti, Nate’s emailed update included the following information: “It was a tough but great week. My local guide and translator have done an excellent job. I was able to map the route to 7 villages this week [and completed]: 49 interviews, 15 hours of recorded interviews, and 50 miles of hiking at 8430 feet of elevation.” That grueling and exceptionally productive research schedule would be replicated for several more weeks, yielding extraordinary data both in terms of quantity and quality. All this bodes well for accomplishing very worthy humanitarian goals.

Nate Grabill is the first Clendening Summer Fellow from the Salina campus of the KU School of Medicine. He has set the bar high not only for future Salina-based applicants, but all who would attempt to follow in his footsteps.

Tarris Rosell, PhD, DMin
Clinical Professor for Ethics
Director, Clendening Summer Fellowship Program

RALPH HERMON MAJOR
LUNCHEON SEMINAR SERIES

The spring saw an exciting trio of seminars, which initiated with our very own Chris Crenner. In a brilliant feat of both summary and exposition, Chris shared with us some of his insights into the problem of race and medicine in the US. As many will know, Chris has been very active during the last decade or so in the exploration of this problem, and especially its nuanced persistence in clinical and laboratory practice throughout the twentieth century. He has made contributions to our historical understanding of the Tuskegee Syphilis study, the ambiguous quality of racial difference in the clinic, and the enduring presence of so-called normal values in the laboratory. His survey forcefully brought to light several medical prejudices endured by patients of color during the twentieth century — prejudices that continue to distort care today. As Chris continues to consider the history of race and medicine, we can look forward to a fine book to grace our shelves.

In March, Laura Hirshbein joined us from the University of Michigan. Dr. Hirshbein is a psychiatrist and historian with interests in the recent history of American psychiatry. Her talk, “The ‘New Morbidity’ in Pediatrics: Opportunities and Challenges of Behavioral Health since the 1970s” offered a nice treatment of emergent concerns regarding mood and behavioral disorders in children and adolescents during the last five decades. What are the main diagnostic features of mental illness in these populations? What are the bases and evolution of the diagnostic categories, and how do these reflect treatment theories and practices in the past while shedding light upon the future? These questions and others invite us to reflect upon childhood mental illness diagnosis itself along with the validity of intervention practices and treatments, not least of all limited access to psychiatric medications. In raising these questions Dr. Hirshbein sketches the complexity of the problem, which is systemic and widespread beyond the clinic to involve policymakers, researchers, and society as a whole. In the final installment of the spring seminars, Moya Peterson presented on the nurses of the 77th Evacuation Hospital. Organized and staffed by personnel from the University of Kansas Hospital, the 77th served, among other places, in North Africa, Sicily, Italy, and France during the Second World War. The unit’s fascinating legacy remains a source of great interest, and in the last decade this interest has translated into the republication of the war journal, Medicine under Canvas (originally published 1949) and an accompanying film documentary of the same title. Moya’s work contributes admirably to this legacy, especially the addition of the compellingly personal stories of five nurses, which she collected in oral interviews and which are recorded in the DVD, The Nurses of the 77th Evacuation Hospital. The dutiful commitment of these nurses was unsurpassed, not
only towards their patients, but to the war effort in general. There can be no doubt that their efforts give honor to KUMC, the whole of the Army Nurse Corps, and much more beyond.

Please visit the departmental website for details regarding the 2018-19 seminar series. We hope to see many of you at one or all of these interesting talks.

Ryan R. Fagan, PhD
Research Assistant Professor

THE SMITHSONIAN’S LEMELSON CENTER FOR THE STUDY OF INVENTION AND INNOVATION

The first half of 2018 has involved me in a dynamic set of public programs at the Smithsonian’s Lemelson Center for the Study of Invention and Innovation, alongside several research projects. One stands out in particular: on June 19, the United States Patent and Trademark Office (USPTO) issued the ten millionth utility patent to the inventor Joseph Marron, a scientist working at the defense contractor Raytheon. His invention of a laser detection and ranging system offers a way of very precisely measuring speed and distance with lasers. The clear application is for driverless cars, but other uses will appear; the inventor himself mentioned applications to video games, including new kinds of controllers. On June 20, I moderated a panel at the National Museum of American History to explore the history of patents and the experience of inventors when interacting with the patent office. Speakers included Susie Armstrong, inventor of methods to connect cell phones to the Internet; Jim West, inventor of the foil electret microphone; Drew Hirshfeld, Commissioner for Patents, USPTO; and Adam Mossoff, a legal historian who has written extensively on intellectual property.

In the history of medicine, patents play a complex role; controversially for prescription drugs and less so for medical devices. In the United States, patents were the sole manifestation of science and technology policy in the 1789 Constitution, when the framers wrote in Article 1, Section 8, “Congress shall have power to...promote the progress of science and useful arts, by securing for limited times to authors and inventors the exclusive right to their respective writings and discoveries.” Patents encourage inventors to disclose what they have done, thereby preventing the secrecy of earlier eras. They also implicitly encourage commercialization, since the inventor can earn rewards from licensing their patented work or can feel safe building a company around bringing an idea to market, since competitors cannot immediately put out the same product.

The first US patent was issued to Samuel Hopkins in 1790 for a new way of making Potash and Pearl Ash, used to make glass and gunpowder in colonial America. The first numbered patent

Panelists (left to right): Susie Armstrong, Drew Hirshfeld, Adam Mossoff, Jim West, and Arthur Daemmrich. Photo courtesy of Laura Havel
went to Senator John Ruggles in 1836 for a way of improving the traction of train locomotives for hauling freight. (Some ten thousand patents were issued before formal numbering began after a fire destroyed most of the Patent Office’s records in 1836.) The patents issued since are an amazing record of the history of invention and underpin revolutions in industry and daily life that have taken place. Patent number 1,000, issued in 1838, was for a way of making railroad cars more comfortable for passengers though the use of springs. In effect, inventors were expanding from advances in freight trains to the comfort of passenger transportation in two short years. The ten thousandth patent, issued in 1853, was for paddle wheels for a river ship, indicative of America’s expanding internal trade and westward expansion. Patent 100,000, in 1870 was for a sun bonnet for horses (you wouldn’t want your horse to get sunburned!). But the very next patent, number 100,001, is for a mechanical seed planter and fertilizer spreader. Agriculture began to industrialize in the 1870s and a migration from farms to cities would follow as it took ever fewer people to plant and harvest food. Patent one million was issued in 1911, for vehicle tires that resisted puncturing on the rough roads of the time. Patenting accelerated in recent decades, with the five millionth patent issued in 1991, the nine millionth in 2015, and the ten millionth now in 2018. This is a testament to the size and scale of scientific, technological, and biomedical research and discovery taking place worldwide, even as there is more pressure than ever before to create commercial applications for new ideas.

The panel was a success, with discussion exploring what has made the United States a successful place of invention for over two hundred years, how the patent system has changed in that time frame, how interactions of inventors with patent examiners shape final patents, and the need to support a more diverse pool of young people, especially women and minorities who are underrepresented in filing for intellectual property.

I have a number of other projects underway, including initial research exploring the first industrial revolution (in the early/mid nineteenth century), with attention to the relationship of new technologies, especially power machinery, to employment. When did new inventions undermine jobs? When were they job creating? Early case studies include pin-making machines, typewriters, calculating machinery, and others. Finding good examples of medicinal technologies is proving somewhat more challenging; your suggestions are welcomed!

Arthur Daemmrich, PhD
Volunteer Associate Professor, Department of History and Philosophy of Medicine
Director, Lemelson Center for the Study of Invention and Innovation
SEPTEMBER
Monday, September 17
**Ralph Hermon Major Luncheon Seminar Series**
Lynda Payne, PhD, UMKC
“The Illustrated Travel Journals of Surgeon Charles Bell (1774-1842)”
12 noon – 1:00 pm Clendening Foyer, 1000 Robinson
Lunch provided
RSVP: Ryan Fagan, 913-588-7040, rfagan@kumc.edu

Thursday, September 20
**Janet Golden, PhD, Rutgers University-Camden**
“America Growing Up: Babies Made Us Modern”
6:00 pm Wine & cheese; 6:30 pm Program
KC Public Library, Plaza Branch, 4801 Main St.
RSVP: kclibrary.org, 816.701.3407

OCTOBER
Tuesday, October 2
**The Don Carlos and Alice V. Peete Lecture**
Powel Kazanjian, MD, PhD, University of Michigan
“Influenza: The 1918 Pandemic and Today’s Threat”
Time - TBA, National WWI Museum
2 Memorial Drive, Kansas City, MO 64108

Friday, October 5
**KUMED Alumni Weekend Open House**
10:00 am - 2:00 pm Clendening Foyer, 1000 Robinson

Thursday, October 18
**The Stanley R. Friesen Lecture in the History of Surgery**
Domenico Bertoloni Meli, PhD, Indiana University
“Between Surgery and Art: Fabricius Hildanus, Frederik Ruysch, and the Representation of Bone Lesions”
4:30 pm Reception, Clendening Foyer, 1000 Robinson
5:00 pm Lecture, Clendening Auditorium, 2004 Robinson

Tuesday, October 30
“Candy Bar” Reception - Celebrate the closing of the Frankenstein Exhibit
1:00 pm - 4:00 pm, Clendening Foyer, 1000 Robinson

Wednesday, October 31
**Ralph Hermon Major Luncheon Seminar Series**
Andrés Rodríguez, PhD, KUMED
“Keats and Suffering”
12 noon – 1:00 pm Clendening Foyer, 1000 Robinson
Lunch provided
RSVP: Ryan Fagan, 913-588-7040, rfagan@kumc.edu

NOVEMBER
Wednesday, November 14
**Ralph Hermon Major Luncheon Seminar Series**
George Thompson, MA, MFA, KUMED
“The American Response to Gas Gangrene on the Western Front”
12 noon – 1:00 pm Clendening Foyer, 1000 Robinson,
Lunch provided
RSVP: Ryan Fagan, 913-588-7040, rfagan@kumc.edu
BOOKED!

It seems like every KUMC department is weeding out their libraries and asking us if we’d like to take their books. Some departments arrange to bring a few books to us, anywhere from three to about twenty. We vacuum the books prior to bringing them into the library—then check them for relevance and duplication. If appropriate to our collection, they are cataloged and placed in the stacks. Some departments may have hundreds of books. I review them for a couple of hours a day until I’ve finished the group. Each day after the review process, I take my selection back to the library and the vacuuming and checking routine begins. When working with a large number of books, we make certain that any books not selected for our collection are returned the next day to the review area. These large projects usually contain a time limit, so we need to review and return items as fast as possible. A metro university that was closing a departmental library presented us with the opportunity of reviewing their early twentieth century books. Starting in January we reviewed comprehensive lists prepared by their librarian. By May we selected and added nearly 10 bankers’ boxes of books to our collection. In the next few weeks we will be receiving their last boxes. It’s been a busy couple of months.

FYI, the review process works a bit differently with outside donors. Since we have no way to recycle books that won’t be added to our collection, we ask outside donors to make a list of their materials. We can usually make a good selection from the title, author, publisher, and most current publication date. If we do accidently get a duplicate, we can return it through the mail.

This year I was nominating chairperson for the Archivists and Librarians in the History of the Health Sciences (ALHHS). At the annual meeting in Los Angeles I was happy to report a successful and uneventful election. The ALHHS meeting was immediately followed by the annual meeting of the American Association for the History of Medicine (AAHM) where Dr. Crenner was the outgoing President. I attended a packed ballroom for his presidential address and later heard his introduction of the Garrison Lecturer, Dr. Julie Fairman, who gave our March 2018 Don Carlos Guffey Lecture. It was a pleasure to hear Dr. Crenner present about his own research.

The LA meetings occurred at the UCLA campus and I know now why Franklin D. Murphy was Chancellor there after his KUMC/KU appointments. The venue and campus were lovely, and of course the weather was spectacular the first part of May. A PhD student from Pennsylvania remarked “and the students are so happy! At home everyone hurries around with solemn faces.” It was an excellent meeting with informative and interesting topics. These meetings always have fascinating and enlightening tours where I learn something that is applicable to our own tours, materials, processes, or policies.

If you’re interested in Murphy, read the 2016 book by Nancy Kellogg Harper, *The Making of a Leader  Franklin D. Murphy the Kansas Years*, and view the UCLA Franklin D. Sculpture Garden at [https://hammer.ucla.edu/collections/franklin-d-murphy-sculpture-garden/](https://hammer.ucla.edu/collections/franklin-d-murphy-sculpture-garden/)

Dawn McInnis, Rare Book Librarian

*So many books, so little time!*
VICTORY MEDALS

In January 2018, KUMC professor of anesthesiology and friend of the Clendening Museum Dr. Anthony Kovac donated several World War I victory medals issued at the end of the war to Allied servicemen, including a Victory Medal issued circa 1918 by the state of New Jersey to its veterans. The front bears a scene with Lady Liberty marching with victorious American troops, with battleships and biplanes visible in the background. The top reads “VICTORY,” with the dates of American military involvement—1917 / 1918—along the bottom. The back bears a paragraph of text: “Presented by the State of New Jersey to its citizens who served in the World War.” When Dr. Kovac obtained the medal, it included the original ribbon and pin clasp with “New Jersey” embossed on the front. However, the original ribbon had unraveled almost completely and become loose from the hardware.

Gaston Lachaise
Standing Woman (Heroic Woman), 1932
Bronze
Object: 88 1/2 in. (224.8 cm)
Franklin D. Murphy Sculpture Garden, University of California, Los Angeles. Gift of Mr. and Mrs. Arthur L. Caplan, Mr. and Mrs. Donald Winston and Mr. and Mrs. Walter McC. Maitland. Courtesy Hammer Museum.
Museums usually opt for conservation (maintaining an object’s condition) rather than restoration (modifying an object to restore a known earlier condition) because restoration can be both expensive and destructive. This object was a good candidate for restoration for several reasons: the removal of the original ribbon would cause no further harm to the object, other examples of the medal with intact ribbons exist as evidence for an earlier condition, and the standardization of military-style medals. The old ribbon was removed from the medal and kept for reference, and a modern replica ribbon (gold and royal-blue grosgrain) sewn in its place. The medal is now in stable condition and fit for prominent display in a future exhibit.

MEDICAL HISTORY UNEARTHED

I was contacted in late April by Jan Leonard, the executive director of Stevens County Economic Development. Interested in promoting tourism to Hugoton, Kansas, he was looking for evidence of Bonnie and Clyde, who allegedly lived in Hugoton for about eighteen months in the 1930s. Mr. Leonard was in the process of excavating a walled-up, collapsed tunnel in a building that was once owned by William E. Bundy, M.D. He ended up pulling several hundred pint-size bottles marked “cod liver oil” and dozens of unlabeled ampoules from the dirt. Unsure on what to do next, he turned to the internet and came across the Clendening Museum. Intrigued, I agreed to do some research on his behalf and found that Dr. Bundy practiced out of the building between 1910 and 1928, formerly known as the Hugoton Hotel. His clinic specialized in treating skin cancer, and was known for his “cancer killer” formula. He likely stored medications for his practice in the tunnel. During my search I found contact information for his living descendants, whom Mr. Leonard contacted and invited to see the site. They kept extensive records on Dr. Bundy, and passed on copies of everything they could. In these records was a copy of the recipe for the “cancer killer.”

Ordinarily the museum wouldn’t accept a gift of unidentified medications, but all of the contextual information available in this case makes a compelling story that can reveal a little of the history of medicine in Southwest Kansas. The museum is now in possession of thirty-seven vials and four bottles, eight of which will be submitted for testing over the summer. This story has received some newspaper coverage, including in the Wichita Eagle, Kansas City Star, and New York Post, and will be developed into a full-size exhibit in the coming months.

Jamie Rees, MA, Museum Curator

Jan Leonard at the doorway to the tunnel.
Photo courtesy of Jan Leonard
Clendening Library and Museum presenter Miki Baird, BFA, MFA, talks with attendees.

Ralph Hermon Major Noon Seminar speaker Moya Petersen, PhD, RN

Visiting lecturer Joanna Radin, PhD

Middle left and above: the HOM Museum and Library Spring Frankenstein exhibit opening.

Photos courtesy of KU Medical Center Photo Services.
MARJORIE CATES, MD

The name Marjorie Cates holds a special place in the history of the Medical Center. A native of Kansas City, Kansas, Dr. Cates broke barriers at KUMC when she became the first African American woman to graduate from the School of Medicine in 1958. Following graduation, Dr. Cates built a notable career in hematology and became an influential advocate for sickle cell awareness. Over the course of her career, Dr. Cates held positions at Howard University and the U.S. Department of the Interior until her untimely passing in 1991 at age 61.

Dr. Cates has achieved even greater significance at KUMC following recent actions by the School of Medicine administration. In June, Dean Robert Simari announced the renaming of the Dr. Harry Wahl Society as the Dr. Marjorie Cates Society. The decision, which was made on the recommendation of the Medical Student Assembly and the Medical Alumni Societies, follows a yearlong discussion between School of Medicine leadership and student organizations over the naming of the medical alumni societies. The School of Medicine will celebrate the renaming of the Dr. Marjorie Cates Society with a dedication this fall.

School of Medicine alumna Dr. Tequilla Manning deserves special thanks for her research of Dr. Marjorie Cates’ career. Dr. Manning began her research of Dr. Cates in 2016 while in her third year of medical school at KUMC. After viewing records housed at the KUMC Archives, Dr. Manning continued her research at Howard University Archives and conducted oral history interviews with Dr. Cates’ daughter, Lauren Ransome. Dr. Manning’s research has not only expanded the archive’s account of Dr. Marjorie Cates, but also helped to raise awareness of Dr. Cates’ story across the Med Center.

Marjorie Cates, MD, was born in Kansas City, Kansas, on June 30, 1930, to Clarence and Anna Cates. The youngest of ten children, Marjorie attended Sumner High School before entering Kansas State College (now Kansas State University) in Manhattan, Kansas, in 1948. She attended Kansas State College until 1952, when she graduated with her bachelor’s degree in home economics and medical technology. Following graduation, Marjorie completed additional pre-medical coursework at the Minnesota General Hospital and the University of Minnesota.

After attending Kansas State College, Marjorie applied to the School of Medicine at the University of Kansas. In her application to the School of Medicine, she expressed her “sincere desire to make a worthwhile contribution to humanity,” and noted her interest in “the human body and the sciences related to it.” She was accepted for the 1954 academic year, and upon entering the School of Medicine, became the second African American woman to enter the program. Geraldine Mowbray, MD, preceded Marjorie when she entered the School of Medicine in 1937, though Dr. Mowbray did not complete her degree at the University of Kansas; instead graduating from the Howard University College of Medicine in 1941.

In 1958, Marjorie graduated with her medical degree from the University of Kansas School of Medicine. In doing so, she became the first African American woman to graduate from the program. Like Dr. Edward Vernon Williams before her, who in 1941 became the first African American to graduate from the School of Medicine, Marjorie helped to topple barriers imposed on African American students wishing to attend medical school at the University of Kansas.

After graduation, Dr. Cates relocated to Washington D.C., where she completed her internship at Freedmen’s Hospital (now Howard University Hospital), and residency at D.C. General Hospital. Later, Marjorie continued her post-doctoral education at some of the nation’s most prestigious institutions of higher learning. She completed three years of additional study in hematology at the New England Medical Center, the Massachusetts Institute of Technology, and Harvard University.
Marjorie Cates, MD, 1958
Photo courtesy of KU Medical Center Archives.

Dr. Cates then set out on a notable career in both the private and public sectors. In short order, she taught hematology at Howard University; served as assistant director at the Howard University Sickle Cell Center; and was named director of health services for the federal Department of the Interior. Later in 1974, Dr. Cates became the chief medical officer at the D.C. Health Department North Area Health Center.

Dr. Cates was a prolific writer over the course of her career, publishing Sickle Cell Disease, a Bibliography, in 1975; and in Blood, the journal of the American Society of Hematology. She was a member of the Women’s Medical Association, the National Medical Association, and the American Medical Association.

Dr. Cates died on July 1, 1991, at age 61 in Silver Spring, Maryland.

Alex Welborn, MLIS, Archivist